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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		
First Inventor	FISHER	D. L.
Title		

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Express Mail Label No.
APPLICA:	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application
	erning utility patent application contents.	Washington, DC 20231
	orm (e.g., PTO/SB/17) duplicate for fee processing)	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. Applicant claims sr See 37 CFR 1.27.	mall entity status.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. Specification (preferred arrangement	[Total Pages 12]	a. Computer Readable Form (CRF)
- Descriptive title		b. Specification Sequence Listing on:
	e to Related Applications ording Fed sponsored R & D	i. ☐ CD-ROM or CD-R (2 copies); or
	quence listing, a table, rogram listing appendix	i i. 🔲 paper
- Background of t	the Invention	c. Statements verifying identity of above copies
- Brief Summary - Brief Description	of the Invention n of the Drawings (<i>if filed</i>)	ACCOMPANYING APPLICATION PARTS
- Detailed Descrip		Assignment Papers (cover sheet & document(s))
Claim(s)Abstract of the l	Disclosure	10. 37 CFR 3.73(b) Statement Power of Attorney
4. X Drawing(s) (35 U.	S.C. 113) [Total Sheets 3]	11. English Translation Document (if applicable)
5. Oath or Declaration	[Total Pages 2]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
a. Newty execu	ited (original or copy)	13. Preliminary Amendment
b. Copy from a	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	ION OF INVENTOR(S)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
named in ti	tement attached deleting inventor(s) he prior application, see 37 CFR	16 Nonpublication Request under 35 U.S.C. 122
1 63(d)(2)	and 1 33(b)	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
6. Application Data	Sheet. See 37 CFR 1.76	17. Other:
		oly the requisite information below and in a preliminary amendment,
or in an Application Data She		of prior application No 60 / 202 034
Prior application information	Divisional Continuation-in-part (CIP) Examiner	Group Art Unit.
For CONTINUATION OR DIVISI	ONAL APPS only: The entire disclosure of th	e prior application, from which an oath or declaration is supplied under
		nation or divisional application and is hereby incorporated by reference. tently omitted from the submitted application parts.
	19. CORRESPONDE	INCE ADDRESS
Customer Number or Bar Co	ode Label Transit Columnia Altr. or Atlanti sa	or Correspondence address below
Name	DAVID L FISHER	CARDSMART TECHNOLOGIES INC
	1140 MOLOKAT	DRIVE
Address		
City	TEGA CAY	State SC Zip Code Z9708
Country	USA Tel	ephone 803/547-3980 Fax x 4078
Name (Print/Type)	DAVID L FISHER	Registration No. (Attorney/Agent)
Signature	Dam 1º	2h Date 4/25/00

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Application Number			
Filing Date			
First Named Inventor	FISHER	, D. L.	
Examiner Name			
Group Art Unit			
Attorney Docket No.			

METHOD OF PAYMENT	HOD OF PAYMENT FEE CALCULATION (continued)		
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES		
indicated fees and credit any overpayments to Deposit	Large Small		
Account	Entity Entity Fee Fee Fee Fee Fee Fee Description	Fee Paid	
Number	Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	reeraiu	
Account Name	105 130 205 65 Surcharge - late filing fee or oath		
Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet		
Applicant claims small entity status	139 130 139 130 Non-English specification		
See 37 CFR 1 27	147 2,520 147 2,520 For filing a request for ex parte reexamination		
2. X Payment Enclosed: X Check Credit card Money Order Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action		
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action		
	115 110 215 55 Extension for reply within first month		
1. BASIC FILING FEE Large Entity Small Entity	116 390 216 195 Extension for reply within second month		
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month		
5545 (V) 5545 (V)	118 1,390 218 695 Extension for reply within fourth month		
101 710 201 355 Utility filing fee 355 106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month		
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal		
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal		
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing		
	138 1,510 138 1,510 Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavordable		
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional		
Fee from Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)		
Total Claims 16 -20** = X =	143 440 243 220 Design issue fee		
Independent Claims X = X	144 600 244 300 Plant issue fee		
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner		
	123 50 123 50 Processing fee under 37 CFR 1 17(q)		
Large Entity Small Entity Fee Fee Fee Fee Pescription	126 180 126 180 Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)		
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection		
104 270 204 135 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a))	ļI	
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1 129(b))		
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)		
and over original patent	169 900 169 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$)	Other fee (specify)		
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)		

SUBMITTED BY			Complete (if applicable)
Name (Pnnt/Type)	DAVID L FISHER	Registration No. (Attorney/Agent)	Telephone 803/547 - 3980
Signature	Oan Z	Zh	Date 4/25/00

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